



ITS NEWS

Infant-Toddler Services

Kansas Department of Health
and Environment

DECEMBER, 1999

Winter Issue

An Introduction	1
Infant-Toddler Services Winter Meeting	1
Save the Date for Spring Conference	1
Federal Monitoring to Focus on Results	2
Part C Federal Data Tables	2
Community Early Intervention Network Changes	2
Parent to Parent Conference	3
THANK YOU!!	3
Family Member Nominations to the Federal Interagency Coordinating Council	3
KACCRRRA's Infant/Toddler Initiative	3
Resources for Feeding Difficulties in Infants	4
Assistive Technology for Kansans Funding Manual	4
Baby Walkers and Development	4
Healthy Child Care Kansas	5
Food Allergy	6
New Publications	7
Kansas Public Health & Environment Information Library Catalog	7
NEC*TAS Listserv Available	7
Trainings/Conferences	8

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ITS NEWS is offered to persons interested in early
intervention services for infants and toddlers with disabilities
and their families. To submit articles or for information, write

An Introduction.....

by Carolyn Nelson

During my orientation as Infant-Toddler Services Coordinator over the past few weeks, I again became aware of the tremendous amount of work you all do for infants and toddlers with disabilities and their families and your continued success with these efforts. Thank you.

Thanks, too, to the staff at the state level who have been so helpful in acquainting me with the obligations of my new position and for filling in during the absence of a Coordinator.

For the past nineteen years I have been the Manager of Child Services at Arrowhead West, Inc. They are the lead and fiscal agent for infant-toddler services throughout a thirteen county area in southwest Kansas. Prior to that position, I taught English and Speech in high school, worked with the Upward Bound program in Arkansas and provided speech-language intervention in the Little Rock, Arkansas public school system.

I have met many of you during my tenure with Arrowhead West. I look forward to meeting the rest of you out there and to working with all of you. Let's work together for the benefit of all infants and toddlers and their families in Kansas. Please feel free to call me with questions, comments, and/or concerns.

Infant-Toddler Services Winter Meeting

The KS Infant-Toddler Services Winter regional meeting will be **January 20, 2000, 1:00 pm to 3:00 pm**, over Interactive TV. This meeting is open to service providers, parents, program administrators, and anyone else interested in early intervention services in Kansas. The ITV sites are as follows:

Hays:	Northwest KS Area Health Education Center 217 East 32nd
Garden City:	Lee Richardson Zoo, Conference Room 312 E Finnup Drive
Wichita:	University of Kansas School of Medicine Women's Resource Center The Wichita Room #1310 1010 N Kansas
Olathe:	Olathe South High School, Rm 124 1640 E 151 Street
Parsons:	KUAP Media Services, Videoconference Room Parsons State Hospital 2601 Gabriel
Salina:	Technology Center, Kansas State at Salina 2409 Scanlon Ave., Rm TC113C
Topeka:	KSDE, Scott Building, ITV Room/Board Room 120 SE 10 th Ave

Save the Date for Spring Conference

by Joe Porting

The Spring Conference will be held **April 18, 2000**, in Salina, Kansas, at the Salina Holidome. The topic of this conference will be Natural Environment/Least Restrictive Environments. Mary Beth Bruder, Professor of Pediatrics at the University of Connecticut, will be the featured presenter. Be on the lookout for more conference information and details about registration after the first of the year. This conference is being co-sponsored by KDHE and KSDE.

Federal Monitoring to Focus on Results

by Tracy Wohl

As reported in the last ITS News, The Office of Special Education Programs (OSEP) has made changes in the way states are being monitored to assure compliance with I.D.E.A. 97. A "Continuous Improvement Monitoring" process has been established that focuses on data that demonstrate improved results for children and youth with disabilities.

OSEP has found that the Part C requirements of IDEA 97 that provide the strongest links to improved results for infants and toddlers with disabilities and their families are those that require the following:

- ' Ensuring effective child find and public awareness activities;
- ' Providing service coordination to facilitate the provision of services across agency lines to meet the needs of infants and toddlers with disabilities and their families;
- ' Supporting family-centered services;
- ' Providing early intervention services in children's natural environments;
- ' Planning transition activities to ensure that toddlers with disabilities transition to preschool or other appropriate services, and have individualized education programs or individualized family service plans on their third birthdays, if appropriate.

A set of performance indicators for each of the above areas has been developed by OSEP that states can use to begin a self-assessment designed to measure progress toward meeting the indicators and to measure adherence to pertinent Federal and State regulations, policies, and procedures.

Indicators are statements such as:

- ' Participation of primary referral sources in the early identification and referral process increases.
- ' IFSPs linked to identified needs are developed within 45 days from referral.
- ' Inclusion in the IFSP of family-identified needs to assist in the development of their infant or toddler increases.
- ' The number of parent referrals increases.
- ' Transition training is provided jointly to Part B and Part C providers and parents in response to their identified needs.

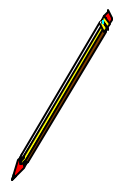
Currently, self-assessment data are being collected that will support the performance measures that have been identified. An analysis for areas of needed data is being conducted as well. Linkages are being established between these performance indicators and site visits, semi-annual report requirements, training and technical assistance, and data collection. Preliminary plans are being made to develop a task force of local Part C network personnel that will provide input into the establishment of performance indicators for the local programs, based on the OSEP indicators.

Part C Federal Data Tables

Data collection forms have been mailed to all Infant-Toddler Networks. These packets included Tables 1,2,4, and 5 on which December 1, 1999 data are to be recorded. These tables are due to KDHE, Infant-Toddler services by January 14, 2000. The Table 3 included in this packet requests program completion/exit information for the time period January 1, 2000 through December 31, 2000. This Table 3 is due in January, 2001.

The Table 3 that was forwarded to networks in the 1998 data collection packet is due on January 14, 2000. Program completion/exit information for the time period January 1, 1999 through December 31, 1999 is to be recorded on this form.

If you have questions or need clarification, please call (785)296-6135 or (800)332-6262.



Community Early Intervention Network Changes

This section of *ITS NEWS* is intended to help keep readers abreast of network changes that come to the attention of our office. Please contact Diane Alexander, (785) 296-6135, to report changes as they occur.

Jennifer Tasset is the new Part C contact person for **Arrowhead West Inc.** in Dodge City.

Nancy Jefferson is the new Part C contact person for **Cloud/Republic ICC**. They also have a new address: **OCCK, 220 East 19th, Concordia, KS 66901**. Their new phone number is **(785) 243-1977, FAX: (785) 243-4524**.

Pam Thuma is the new Part C contact person for **Flint Hills Special Education Coop** in Emporia.

Harvey County Infant Toddler Program has a new address: **218 E 7th, Newton, KS 67114. Phone: (316) 284-6510, FAX: (316) 284-6513.**

Wyandotte County Infant-Toddler Services has new telephone and fax numbers: **(913) 551-3700 x120, FAX: (913) 551-3725.**



Parent to Parent Conference

International Parent to Parent Conference - "Pioneering Spirit: Blazing New Trails." May 5-7, 2000 in Reno, Nevada. Let the Adventure Begin!

The theme of this conference acknowledges and celebrates parent to parent models and philosophies and embraces the growing recognition that it is important for families with children with special needs to know where we've been, why we are here, and where we are going. Research indicates that families connected to a peer support network are more knowledgeable about resources, have a greater sense of empowerment, are more hopeful, and generally have a more positive attitude about their lives and the future of their children's lives.

This International Parent to Parent Conference will again bring parents/families and professionals from around the world together to share and learn from each other about how best to support families and develop best practices for people with disabilities as we transition into the 21st century. Registration is now available! Contact: Cheryl Dinnell, Nevada Parent Network, University of Nevada, Reno, COE, REPC/285, Reno, NV 89557 (775) 784-4921, x2352; Fax: (775) 784-4997. E-mail: cdinnell@scs.unr.edu Web Site: <http://www.unr.edu/repc/npn>

!! THANK YOU !!

Thanks to the 21 Kansas networks who are working so diligently enrolling families and collecting data for the National Early Intervention Longitudinal Study! As of November 29, 227 families have given their consent to participate in the longitudinal study. This number represents 85% of Kansas' targeted enrollment for the study. You aren't far from 100%!!! A huge THANK YOU to all of you who are putting forth the extra effort and time to assist Kansas and NEILS in their efforts to gather information that will be used to address important advocacy, funding, and policy issues regarding infant-toddler services at the national, state, and local levels.



Family Member Nominations to the Federal Interagency Coordinating Council

The Federal Interagency Coordinating Council (FICC) is announcing its call for nominations of family members to serve

on the FICC. They are seeking three family members to fill two seats to be vacated in June of 2000 and one in June of 2001. These positions are for three year terms. FICC meetings are held quarterly in Washington D.C. Travel expenses and other associated costs are reimbursed. They are particularly interested in families with experience with AIDS, Fetal Alcohol Syndrome, technology, and issues compounded by poverty. The nominee(s) should be parents who are living the commitment of raising a child with a disability and who will bring a parent voice to the table. The nominee can also be a grandparent, a foster parent, or a sibling of a child with a disability.

If any network is interested in nominating someone, please call Infant-Toddler Services in Topeka, (785) 296-6135, for additional information.

KACCRRRA's Infant/Toddler Initiative

The Kansas Association of Child Care Resource and Referral Agencies (KACCRRRA) announces a new *Infant/Toddler Project* in association with the Kansas Department of Social and Rehabilitative Services (SRS). The project will place Infant/Toddler Specialists in each of the 16 Resource and Referral (R&R) agencies covering all 105 counties throughout Kansas. The Infant/Toddler Specialists will provide training, technical assistance, and consultation to regulated child care providers.

The *training* offered through the R&R's will be specific to issues concerning infants and toddlers including child development, best practices in group care settings, and health and safety issues. The Infant/Toddler Specialists will assist in coordinating existing infant/toddler training resources in each community. *Technical assistance* to providers will include telephone and/or on-site visits to child care centers, family day care providers, and part-day programs at the provider's request. Flyers, brochures and other resources and information about infants and toddlers will also be available. Additional infant/toddler *resources* will be available in each R&R's Resource Library including resource/activity kits, toys, children's books, and a variety of resources for adult caregivers.

The Infant/Toddler project will also offer an opportunity to collect information about the number of infant/toddler slots available to families *and* the hurdles to providing group care for infants and/or toddlers. These data will assist policy makers and communities in improving the quality and quantity of care provided to children in this age group.

For the phone number of the R&R in your community, call KACCRRRA at (877) 678-2548. For more information contact Lana Messner, Infant/Toddler Project Director at KACCRRRA or (316) 729-8635.

Resource for Feeding Difficulties in Infants

Excerpted from the *Kansas Association for Infant Mental Health Newsletter*, Volume 4, Issue 2, July 1999.

Dr. Martin Maldonado, Menningers, has recently co-edited a book in Spanish on feeding difficulties in infants with Drs. Teresa Lartigue and Hector Avila. It is an edited book with contributions from authors from several countries. Its first section deals with the normal development of eating and feeding abilities and the feeding relationship. The second section addresses problems in feeding and the feeding relationship. The third section deals with transcultural issues and the fourth with intervention strategies. Dr. Maldonado wrote several chapters on disturbances and their treatment. The book is written in Spanish and can be obtained through the Internet at www.plazayvaldez.com.

The reference is: Lartigue Becerra, T., Maldonado-Duran, M., Avila Rosas, H. (eds.) La Alimentacion en la primera infancia y sus efectos en el desarrollo. Asociacion Psicoanalitica Mexicana AC y Plaza y Valdez. 1998. Mexico. [Feeding in early childhood and its effects on development.]

Dr. Maldonado has also been chosen as one of only 30 fellows for ZERO TO THREE's prestigious Leaders for the 21st Century program. This new leadership development initiative provides each of the participants with an opportunity to collaborate with top leaders from many disciplines, as well as receive assistance for an innovative project aimed at improving the lives of young children.

Assistive Technology for Kansans Funding Manual

The Assistive Technology for Kansas Funding Manual is available on both Mac and IBM disks or in print version for the cost of reproduction (\$20). It is also available on the Assistive Technology for Kansans' website at: <http://www.atk.lsi.ukans.edu/funding/index.htm>

For alternative formats, please contact the Project Office in Parsons:
Assistive Technology for Kansans
2601 Gabriel
Parsons, KS 67357
(316) 421-8367 V/TDD
(316) 421-0954 Fax
ssimmons@ukans.edu

Publication Dates: November 8, 1996 and September 8, 1998. For specific questions regarding the content of this manual, please contact Mary Ellen O'Brien Wright at (785) 233-4550 or send e-mail to her at meow@cjnetworks.com.

Baby Walkers And Development

Source: Region VII *Healthy Child Care America Community Access to Child Health Newsletter*

New research shows baby walkers impair infants' physical and intellectual development. An article published in the latest issue of the *Journal of Developmental and Behavioral Pediatrics* concluded that infants who are "exercised" in baby walkers are slower to sit upright and crawl. They also achieve lower results on early tests of mental and physical development when compared with other infants.

The authors conclude that walker trays restrict infants' view of their moving legs, depriving them of visual feedback that helps them learn how their bodies move through space. Walkers also prevent infants from exploring and grabbing at things around them, which is critical to their early mental development.

109 infants were tested at six, nine or 12 months of age, and again three months later, using a standard measure of physical and mental development. The infants were divided into three groups, those who never used walkers, those who used the "older" style with a smaller tray and those who used the "newer" style with a large tray.

Infants who used the newer-style walkers fared the worst. On average those babies sat upright, crawled, and walked more than five weeks later than infants who never used one, and three weeks later than those who had older models. "Newer-style walkers lead to greater delays in physical and mental development," said Dr. Roger Burton, the co-author of the study.

The infants who used the newer-style walkers also had the lowest scores on physical and mental development, scoring 12 per cent lower on mental and motor skill tests than those who never used one. Infants with the old-style scored 5 per cent lower than those who never used one.

Previous research found that 50% of children who use baby walkers are injured every year, with 4,000 babies taken to the hospital after falling down stairs or into fires and heaters. Others suffer head injuries when the walkers topple over. The injuries range from concussion to broken limbs.

Dr. Burton said, "When the danger factor is considered in conjunction with the developmental data presented by our study, the risks seem to outweigh any possible benefits of early walker exposure. There is no evidence walkers help to teach a child to walk or promote development. They seem to fulfil the needs of parents by keeping their children occupied rather than offering any benefit for the child."



Healthy Child Care Kansas

The Kansas Department of Health and Environment Child Care Licensing and Registration (CCLR) Section received a \$150,000 grant from the Maternal and Child Health Bureau in 1996 (\$50,000 over a 3 year period) to form a State Task Force to study the issue of prescription medication administration in child care facilities and to develop appropriate training for prescription medication administration for child care providers. Through this process, it was determined that the statutory language in the Nurse Practices Act considers the administration of prescription medication as a nursing practice that cannot be performed by child care providers without first being trained by a nurse who then “delegates” the responsibility of the medication administration to the provider. Without receiving the “delegation,” a child care provider is open to lawsuit from the State Board of Nursing for practicing a nursing act. The Board of Nursing is working with CCLR to resolve this issue without involving providers in lawsuits unless there is neglectful practice on the part of the provider.

Child Care Licensing Laws have been in effect since 1919. Regulations allow child care providers to administer prescription medication with written parental permission, in direct conflict with the Nurse Practices Act. Recommended changes are necessary to protect both child care providers and the children in their care. The recommendation is consistent with the purpose of child care regulation, which is to protect children from harm.

Significant work has been accomplished by the State Task Force. Members of the Task Force included representatives from the Department of Health and Environment, Department of Education, Department of Social and Rehabilitation Services, State Board of Nursing, State Board of Healing Arts, local county health department child care surveyors, Head Start, Child Care State Organizations, parents of children with special health needs, and child care providers in both child care homes and centers.

The State Task Force recommended a statutory change to the Nurse Practices Act to allow child care providers who have received training to administer basic prescription medications to children in their care. KDHE contracted with Heart of America Family Services. Kim Salaway, RN, developed the “Healthy Child Care Kansas” training manual, train-the-trainers manual, and appropriate exam to determine provider competency. As of this date, the training materials and exam have been completed and pilot tested.

In addition to the statutory changes recommended by the Healthy Child Care Kansas Task Force, appropriate child care regulations will need to be written. The prescription medication administration training (Healthy Child Care Kansas) and exam must be made available state-wide. Nearly all children in child care facilities require prescription medication administration at some time. The proposed draft of the statute would exempt child care providers from the

Nurse Practices Act in a very LIMITED way which would cover approximately 78% of the most common prescription

medicines administered in child care facilities.

Children with significant health problems are usually identified and receive services through Individual Family Service Plans (IFSP) or Individual Education Plans (IEP) which generally provide health professionals to teach providers to perform specific nursing duties or provide an on-site specialist to perform these duties. Medications or other medical procedures such as tube feeding, apnea machines, etc., that require more vigilance on the part of the provider may still be administered by receiving specific instruction and delegation from the child’s nurse or doctor.

Again, the emphasis is on the protection of the children from potential harm from prescription medication administration mistakes made by the child care provider. Although hard data are not available regarding medication errors, violations have been noted by child care facility surveyors. Common violations include the administration of prescription medication prescribed for one sibling to another sibling based upon parent request, and lack of accurate documentation of medication administration. Education of child care providers on the importance and side-effects of prescription medication administration is necessary to protect children and the child care providers. The Healthy Child Care Kansas training also emphasizes the need for the child care provider to partner with the parent and the child’s physician or nurse in order to provide safe medication administration. The State of Kansas is providing nation-wide leadership in resolving this issue.

At this time, the Healthy Child Care Kansas Training is using a “Train-the-Trainer” model. Trainers are then taking the materials back into their local communities to provide local training on a **voluntary basis** and to further test the materials and examination of competency.

Should the proposed legislation pass, the training will be mandated for all child care providers opting to provide basic prescription medication administration to children in their care. The Child Care Licensing and Registration section is encouraging providers to give basic prescription medication to children in their care due to the burden to parents should providers choose not to provide medication administration.

The current Healthy Child Care Kansas Training is a ten clock hour course and includes prescription medication administration, as well as other basic health information such as illness policy exclusion, communicable diseases, immunizations, serving children with special needs, and local, state, and national resources for further information. This additional information was included in the training manual based on the results of a survey of child care providers that indicated the need for learning opportunities in these areas. The State Task Force has recommended that the Kansas Department of Health and Environment permanently administer the Healthy Child Care Kansas training and competency examination following the end of the grant period.

Food Allergy

by Sandy Perkins, MS, RD

Feeding a child with food allergies can be extremely challenging. It requires an extensive knowledge of the various names/terms for foods, how foods are prepared both in the home and commercially, what ingredients may be in various dishes, what are alternative sources of specific nutrients and which foods may be substituted for restricted foods in the preparation of allergen-free recipes.

The first step is learning all the different names which may be used for the restricted food or terms which might indicate that a product may contain the item. The Food Allergy Network has developed lists of label terms for the seven most common allergens: milk, egg, soy, peanut, tree nut, shellfish and wheat. In addition, The Food Allergy Network publishes and distributes pamphlets, cookbooks, videos, and other materials to make raising a child with food allergies a little easier.

The Food Allergy Network is a non-profit organization dedicated to support families and caregivers of individuals with food allergies. They can be contacted at:

The Food Allergy Network
10400 Eaton Place Suite 107
Fairfax, VA 22030-2208
Internet: <http://www.foodallergy.org>
Phone: (703) 691-3179

After learning all the terms, every label must be carefully read before purchasing products at the store. By law, all domestic products must have an ingredient label which lists all functional foods in weight order. Ingredients which make up less than 2% total product weight do not have to be listed by weight. Incidental additives do not have to be included on the label. An example of an incidental additive would be the oil which was added to the water used to cook the pasta in a frozen spaghetti dinner. Other countries may not have as strict labeling laws as the United States. A person with severe food allergies may want to avoid imported foods.

While labels list all of the functional foods in a product, there may still be confusion about the use of generic and misleading terms, and surprising ingredients which may contain certain allergens. Generic terms allow manufacturers flexibility in their use of commodities and protection of their trade secret ingredients. Flavorings, spices, food starches and vegetable broth are commonly used generic terms.

Flavoring is the most troublesome ingredient term for individuals with food allergies. Flavorings may contain any of the major allergens. It may be necessary to call a manufacturer to find out what is in the flavoring, even if the flavoring is termed artificial. An artificial flavoring is a flavoring that has one component which is artificial, even if the majority of the components are natural. Spices, like flavorings, contain a blend of different ingredients which make the product unique, but in general spices do not contain any of the major allergens. Vegetable broth may contain a variety of vegetables and may also contain soy.

Food starches can be listed on the label in a variety of ways. Sources of food starches may be corn, wheat, potato, tapioca, or something else. Some labels clearly declare the source, and they are the easiest products to use. Some labels list several different sources which allow the manufacturer to vary the source of starch dependent on what is available at the time of production. Others just list food starch with no declaration of the source. In either case, the manufacturer must be contacted to find out the source.

When calling a manufacturer to find out what is in a product be sure to have the label handy so correct product or batch can be identified. The question should be asked in a way that can be answered without revealing any trade secrets. For example, "Are there any milk or milk derivatives in your natural flavoring?" instead of "Tell me what is in your natural flavoring." It is important to remember that the response is only accurate for that particular product batch. It can not be assumed that what was "safe" last month will still be "safe" the next time the product is bought. The manufacturer must always be called about generic terms.

Many labels may make claims which are misleading. The label term "non-dairy" does not necessarily mean milk-free. The FDA labeling laws allow the use of the term "non-dairy" in products which contain milk derivatives and will cause allergic reactions in most individuals with milk allergies. Caution must be used with any product labeled as "non-dairy" even if it is a fruit based beverage. In general, it is safer for a milk allergic individual to avoid the use of commercially prepared cheese alternatives and frozen dessert products. Egg substitutes are usually made from egg whites and are meant for people on a low fat/low cholesterol diet and are not appropriate for someone with an egg allergy. Another confusing label term is "whole grain". This means that the product contains a whole grain, but does not mean the product does not contain other grain products as well.

All labels should be read carefully. In addition to containing generic and misleading terms, some commercial products may contain some surprising ingredients. A few examples are listed below.

Milk and milk products can be found in fruit-based products, seasoning mixes, corn tortillas, reduced fat processed meats, canned meats, tuna, brown sugar, caramel flavoring, and chocolate. Plain chocolate is usually processed on the same equipment as milk-chocolate leading to cross contamination. Milk products are added to many margarines to give a buttery taste. Most unsalted margarines do not contain milk products.

Soy flour is found in commercial bread products, reduced fat peanut butters, seasoning mixes, low fat sausages, and tuna.

Egg products may be used in imitation crab meat, pastas, marshmallow cream, clear soups, and fancy coffees.

Peanut products have been used in chili, spaghetti sauce, egg rolls, and other Asian cuisine.

New Publications

Two new publications are available to assist families and communities in addressing the needs of children who have mental health and behavioral issues:

FAMILY GUIDE TO SYSTEMS OF CARE FOR CHILDREN WITH MENTAL HEALTH NEEDS. US Department of Health and Human Services. Available in English and Spanish. The content and format of this manual were developed by families across the country.

SYSTEMS OF CARE - PROMISING PRACTICES IN CHILDREN'S MENTAL HEALTH. Comprehensive Community Mental Health Services for Children and Their Families Program. A set of seven modules covering the following:

1. New Roles for Families in Systems of Care
2. Promising Practices in Family-Provider Collaboration
3. The Role of Education in a System of Care: Effectively Serving Children with Emotional or Behavioral Disorders
4. Promising Practices in Wraparound for Children with Serious Emotional Disturbance and Their Families
5. Training Strategies for Serving Children with Serious Emotional Disturbance and Their Families in a System of Care
6. Building Collaboration in Systems of Care
7. A Compilation of Lessons Learned from the 22 Grantees of the 1997 Comprehensive Community Mental Health Services for Children and Their Families Program

For more information on these publications and on how to acquire them contact: Trina Osher, Coordinator of Policy and Research, Federation of Families for Children's Mental Health, 1021 Prince Street, Alexandria, VA 22314-2971. Phone: (703) 684-7710 E-Mail: tosher@ix.netcom.com

The Promising Practices modules are accessible online through The Center for Effective Collaboration and Practice Web Site- www.air-dc.org/cecp/.

**WISHING A SAFE AND
AND A PROSPEROUS**

Kansas Public Health and Environment Information Library Catalog

KDHE's Center for Health and Environmental Statistics, through Kansas State University's Community Health Library Services, has published the agency's 1999-2000 Kansas Public Health and Environment Information Library (KPHEIL) catalog. This catalog lists the 800 pamphlet & factsheet titles and the over 1,000 audiovisual titles maintained in KPHEIL to support the mission of KDHE programs. Topics covered are communicable diseases, chronic disease, nutrition, wellness, children, youth, families, health services, and environment. All of these items are available to the citizens of Kansas. Most of the printed materials are non-copyrighted fact sheets which can be freely copied. Audiovisuals are available for borrowing at no cost other than return postage.

A limited number of hard copies of the catalog are available. In order to keep costs low, orders are accepted only via US mail -- Community Health Library Services-KPHEIL, Kansas State University, 10D Umberger Hall, Manhattan, KS 66506-3407, via e-mail at KPHEIL@oz.oznet.ksu.edu and via FAX, 785-532-5121. If you have delivery questions, the point of contact for KPHEIL is Chris Ponte at (785) 532-5120.

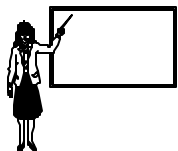
The catalog can also be accessed through the KDHE web site: <http://www.kdhe.state.ks.us/library/listing.html>. By using your browser you can search for specific key words and titles.

NEC*TAS Listserv Available

NEC*TASNews is a service of NEC*TAS, the National Early Childhood Technical Assistance System. NEC*TAS monitors a number of listservs and compiles items of interest for persons involved in early intervention and early childhood special education and sends them as NEC*TAS News approximately weekly. Subscribers to NEC*TAS listservs receive NEC*TASNews. If you are not a subscriber and wish to be, go to: <http://www.unc.edu> and subscribe to nectas-ectalk. Questions? Contact Mary Shields at mary_shields@unc.edu or (919) 962-7302.

**HAPPY HOLIDAY SEASON
NEW YEAR TO ALL**





Trainings/Conferences

ACCK Seminars:

Supporting the Mental Health of Adoptive Families.

Thursday, February 17, 2000, 6:30- 9:30 p.m. Lindquist Hall,
Wallerstedt Library, Bethany College, Lindsborg.

Taking Care of the Caregivers. Thursday, April 6, 2000,

6:30-9:30 p.m. Miller 101, McPherson College, McPherson.

2000 Summer Seminar in Early Intervention. June 5, 6, 7,

2000, 9:00 a.m. - 4:30 p.m. Bethany College, Lindsborg. Topic:
Nurturing Kids Who Care: Promoting the Well-being of
Children and Families in Supportive Communities.

Contact Person: Julie Willems

ACCK

210 S Main Street

McPherson KS 67460

(316) 241-5150 x111

FAX: (316) 241-5153

Email: ajuliew@acck.edu

Families Together, Inc., Conferences:

Annual Statewide Conference. February 5, 2000. Manor
Conference Center, ExpoCentere, Topeka.

Parent Networking Conferences.

February 18-19, 2000 - Winfield
- Manhattan

February 25-26, 2000 - Pittsburg

March 3-4, 2000 - Garden City

March 24-25, 2000 - Kansas City

Family Enrichment Weekend.

April 7-8, 2000 - Hays

April 28-29, 2000 - Lawrence

Contact: Bonni Pennie or Lesli Girard, Families Together, Inc.,
at (800) 264-6343 (for parents) or (785) 233-4777.

Other Conferences:

KDEC Annual Conference. March 2-4, 2000. Wichita
Airport Hilton, Wichita. Contact: Debbie Mai; (316) 267-5437.

*Transitioning into Developmentally Appropriate Practices
(TDAP) Conference.* April 27-28, 2000. Wichita Airport
Hilton, Wichita. Contact: Misty Goosen; (785) 864-0725.